

Food Establishment Inspection Report

Score: 96.5

Establishment Name: SAM'S GAS N GRILL

Establishment ID: 3034020844

Location Address: 435 BETHANIA RURAL HALL ROAD

Inspection Re-Inspection

City: RURAL HALL

State: NC

Date: 07 / 15 / 2019 Status Code: A

Zip: 27045

County: 34 Forsyth

Time In: 01 : 15 ^{am} _{pm} Time Out: 02 : 50 ^{am} _{pm}

Total Time: 1 hr 35 minutes

Permittee: SAM'S GAS N GRILL INC

Category #: III

Telephone: (336) 969-4832

FDA Establishment Type: _____

Wastewater System: Municipal/Community On-Site System

No. of Risk Factor/Intervention Violations: 5

Water Supply: Municipal/Community On-Site Supply

No. of Repeat Risk Factor/Intervention Violations: _____

Foodborne Illness Risk Factors and Public Health Interventions								
Risk factors: Contributing factors that increase the chance of developing foodborne illness.								
Public Health Interventions: Control measures to prevent foodborne illness or injury.								
IN	OUT	N/A	N/O	Compliance Status	OUT	CDI	R	VR
Supervision .2652								
1	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	PIC Present; Demonstration-Certification by accredited program and perform duties	2	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Employee Health .2652								
2	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Management, employees knowledge; responsibilities & reporting	3	13	<input checked="" type="checkbox"/>	<input type="checkbox"/>
3	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Proper use of reporting, restriction & exclusion	3	13	0	<input type="checkbox"/>
Good Hygienic Practices .2652, .2653								
4	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Proper eating, tasting, drinking, or tobacco use	2	1	0	<input type="checkbox"/>
5	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	No discharge from eyes, nose or mouth	1	03	0	<input type="checkbox"/>
Preventing Contamination by Hands .2652, .2653, .2655, .2656								
6	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Hands clean & properly washed	4	2	0	<input type="checkbox"/>
7	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	No bare hand contact with RTE foods or pre-approved alternate procedure properly followed	3	13	0	<input type="checkbox"/>
8	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Handwashing sinks supplied & accessible	2	1	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
Approved Source .2653, .2655								
9	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Food obtained from approved source	2	1	0	<input type="checkbox"/>
10	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Food received at proper temperature	2	1	0	<input type="checkbox"/>
11	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Food in good condition, safe & unadulterated	2	1	0	<input type="checkbox"/>
12	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Required records available: shellstock tags, parasite destruction	2	1	0	<input type="checkbox"/>
Protection from Contamination .2653, .2654								
13	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Food separated & protected	3	<input checked="" type="checkbox"/>	0	<input checked="" type="checkbox"/>
14	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Food-contact surfaces: cleaned & sanitized	3	13	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
15	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Proper disposition of returned, previously served, reconditioned, & unsafe food	2	1	0	<input type="checkbox"/>
Potentially Hazardous Food Time/Temperature .2653								
16	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Proper cooking time & temperatures	3	13	0	<input type="checkbox"/>
17	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Proper reheating procedures for hot holding	3	13	0	<input type="checkbox"/>
18	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Proper cooling time & temperatures	3	13	0	<input type="checkbox"/>
19	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Proper hot holding temperatures	3	13	0	<input type="checkbox"/>
20	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Proper cold holding temperatures	3	13	0	<input type="checkbox"/>
21	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Proper date marking & disposition	3	13	0	<input type="checkbox"/>
22	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Time as a public health control: procedures & records	2	1	0	<input type="checkbox"/>
Consumer Advisory .2653								
23	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Consumer advisory provided for raw or undercooked foods	1	03	0	<input type="checkbox"/>
Highly Susceptible Populations .2653								
24	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Pasteurized foods used; prohibited foods not offered	3	13	0	<input type="checkbox"/>
Chemical .2653, .2657								
25	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Food additives: approved & properly used	1	03	0	<input type="checkbox"/>
26	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Toxic substances properly identified stored, & used	2	1	0	<input type="checkbox"/>
Conformance with Approved Procedures .2653, .2654, .2658								
27	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Compliance with variance, specialized process, reduced oxygen packing criteria or HACCP plan	2	1	0	<input type="checkbox"/>

Good Retail Practices								
Good Retail Practices: Preventative measures to control the addition of pathogens, chemicals, and physical objects into foods.								
IN	OUT	N/A	N/O	Compliance Status	OUT	CDI	R	VR
Safe Food and Water .2653, .2655, .2658								
28	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Pasteurized eggs used where required	1	03	0	<input type="checkbox"/>
29	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Water and ice from approved source	2	1	0	<input type="checkbox"/>
30	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Variance obtained for specialized processing methods	1	03	0	<input type="checkbox"/>
Food Temperature Control .2653, .2654								
31	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Proper cooling methods used; adequate equipment for temperature control	1	03	0	<input type="checkbox"/>
32	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Plant food properly cooked for hot holding	1	03	0	<input type="checkbox"/>
33	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Approved thawing methods used	1	<input checked="" type="checkbox"/>	0	<input type="checkbox"/>
34	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Thermometers provided & accurate	1	03	0	<input type="checkbox"/>
Food Identification .2653								
35	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Food properly labeled: original container	2	1	0	<input type="checkbox"/>
Prevention of Food Contamination .2652, .2653, .2654, .2656, .2657								
36	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Insects & rodents not present; no unauthorized animals	2	1	0	<input type="checkbox"/>
37	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Contamination prevented during food preparation, storage & display	2	1	0	<input type="checkbox"/>
38	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Personal cleanliness	1	03	0	<input type="checkbox"/>
39	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Wiping cloths: properly used & stored	1	03	0	<input type="checkbox"/>
40	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Washing fruits & vegetables	1	03	0	<input type="checkbox"/>
Proper Use of Utensils .2653, .2654								
41	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	In-use utensils: properly stored	1	03	0	<input type="checkbox"/>
42	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Utensils, equipment & linens: properly stored, dried & handled	1	03	0	<input type="checkbox"/>
43	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Single-use & single-service articles: properly stored & used	1	03	<input checked="" type="checkbox"/>	<input type="checkbox"/>
44	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Gloves used properly	1	03	0	<input type="checkbox"/>
Utensils and Equipment .2653, .2654, .2663								
45	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Equipment, food & non-food contact surfaces approved, cleanable, properly designed, constructed, & used	2	<input checked="" type="checkbox"/>	0	<input type="checkbox"/>
46	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Warewashing facilities: installed, maintained, & used; test strips	1	<input checked="" type="checkbox"/>	0	<input checked="" type="checkbox"/>
47	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Non-food contact surfaces clean	1	03	0	<input type="checkbox"/>
Physical Facilities .2654, .2655, .2656								
48	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Hot & cold water available; adequate pressure	2	1	0	<input type="checkbox"/>
49	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Plumbing installed; proper backflow devices	2	1	0	<input type="checkbox"/>
50	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Sewage & waste water properly disposed	2	1	0	<input type="checkbox"/>
51	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Toilet facilities: properly constructed, supplied & cleaned	1	03	0	<input type="checkbox"/>
52	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Garbage & refuse properly disposed; facilities maintained	1	03	0	<input type="checkbox"/>
53	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Physical facilities installed, maintained & clean	1	03	<input checked="" type="checkbox"/>	<input type="checkbox"/>
54	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Meets ventilation & lighting requirements; designated areas used	1	03	0	<input type="checkbox"/>
Total Deductions:					3.5			



Comment Addendum to Food Establishment Inspection Report

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 City: RURAL HALL State: NC
 County: 34 Forsyth Zip: 27045
 Wastewater System: Municipal/Community On-Site System
 Water Supply: Municipal/Community On-Site System
 Permittee: SAM'S GAS N GRILL INC
 Telephone: (336) 969-4832

Establishment ID: 3034020844
 Inspection Re-Inspection Date: 07/15/2019
 Comment Addendum Attached? Status Code: A
 Water sample taken? Yes No Category #: III
 Email 1: ATZSPETRO@GMAIL.COM
 Email 2:
 Email 3:

Temperature Observations

Cold Holding Temperature is now 41 Degrees or less

Item	Location	Temp	Item	Location	Temp	Item	Location	Temp
chix wing	hot bar	135	tomatoes	make unit	39			
macaroni	hot bar	146	lettuce	make unit	38			
mash potato	hot bar	141	slaw	reach-in cooler	40			
chix tender	hot bar	135	chili	slow cooker	146			
potato wedge	hot bar	146	hot water	3-compartment sink	122			
fish	hot bar	151	cl2 sani	3-comp sink (ppm)	0			
hot dog	upright cooler	40	cl2 sani	3-comp sink (corrected)	50			
pork loin	upright cooler	35						

Observations and Corrective Actions

Violations cited in this report must be corrected within the time frames below, or as stated in sections 8-405.11 of the food code.

- 1 2-102.12 Certified Food Protection Manager - C - No certified food protection manager on premises during inspection. At least one employee who has supervisory and management responsibility and the authority to direct and control food preparation and service shall be a certified food protection manager. 0 pts.

- 2 2-201.11 (A), (B), (C), & (E) Responsibility of Permit Holder, Person in Charge, and Conditional Employees - P - Person in charge was unaware of 5 major foodborne illnesses and symptoms, and no written employee health policy is posted in establishment. Food employees shall be aware of the 5 major foodborne illnesses and symptoms, and report when they are suffering from such. CDI: PIC was provided with written employee health policy. 0 pts.

- 8 6-301.12 Hand Drying Provision - PF - No paper towels provided at handwashing sink nearest warewashing room. Handwashing sinks shall be provided with a sanitary means of drying hands. CDI: PIC provided paper towels. 0 pts.

Lock Text



Person in Charge (Print & Sign): Patsy *First* Stevens *Last*
 Regulatory Authority (Print & Sign): Michael *First* Frazier *Last* REHSI

Patsy Stevens
Michael Frazier

REHS ID: 2737 - Frazier, Michael

Verification Required Date: 07 / 25 / 2019

REHS Contact Phone Number: (336) 703 - 3382



North Carolina Department of Health & Human Services • Division of Public Health • Environmental Health Section • Food Protection Program
 DHHS is an equal opportunity employer.



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- 13 3-302.11 Packaged and Unpackaged Food-Separation, Packaging, and Segregation - P - Raw chicken being stored over raw pork loins, and raw hamburger patties being stored over ready-to-eat biscuits in upright cooler. Raw animal foods and ready-to-eat foods shall be protected from cross-contamination by arranging foods in equipment so that contamination cannot occur. CDI: PIC corrected stacking order in both cases.

- 14 4-501.114 Manual and Mechanical Warewashing Equipment, Chemical Sanitization-Temperature, pH, Concentration and Hardness - P - Pan being sanitized in chlorine sanitizer that failed to register 50 ppm via REHSI test strips. A chlorine sanitizer shall have a concentration of 50-200 ppm. CDI: PIC drained sanitizer and remade it to measure 50 ppm. 0 pts.

- 33 3-501.13 Thawing - C - Raw chicken being thawed in standing water that measured 80F. Potentially hazardous food shall be thawed under running water at a temperature of 70F or below, under refrigeration, as part of the cooking process, or in a microwave oven and immediately transferred to cooking equipment.

- 43 4-903.11 (A) and (C) Equipment, Utensils, Linens and Single-Service and Single-Use Articles-Storing - C - Box of single-use cups being stored on floor in warewashing room. Single-use articles shall be stored at least 6 inches above the floor. 0 pts.

- 45 4-205.10 Food Equipment, Certification and Classification - C - Domestic-use slow cooker in use in establishment to reheat and hold chili. Except for toasters, mixers, microwave ovens, water heaters, and hoods, food equipment shall be used in accordance with the manufacturer's intended use and certified or classified for sanitation by an ANSI-accredited certification program. // 4-501.11 Good Repair and Proper Adjustment-Equipment - C - Broken handle on right door of centaur cooler. Chipped shelving in upright cooler. Caulk peeling in hood seams. Shelf bracket loose over sanitizer basin at 3-compartment sink. Equipment shall be maintained in good repair.

- 46 4-302.14 Sanitizing Solutions, Testing Devices - PF - No test strips present in establishment. A test kit or other device that accurately measures the concentration in mg/L (or ppm) of sanitizing solutions shall be provided. VR: Verification required. Contact Michael Frazier at 336-703-3382 or fraziemb@forsyth.cc when test strips are obtained. Obtain test strips by 7/25/2019.

- 53 6-501.11 Repairing-Premises, Structures, Attachments, and Fixtures-Methods - C - Handwashing sink and toilet need to be recaulked to floor in restroom. Ceiling tile pushed aside above handwashing sink. Physical facilities shall be maintained in good repair. // 6-201.13 Floor and Wall Junctures, Coved, and Enclosed or Sealed - C - No coved base in restroom. Floor and wall junctures shall be coved. 0 pts.



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